

**POWER OF ATTORNEY
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CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/576,690
Filing Date	February 6, 2007
First Named Inventor	James McSwiggen
Title	RNA INTERFERENCE MEDIATED INHIBITION OF NOGO...
Group Art Unit	1635
Examiner Name	Gibbs, Terra C.
Attorney Docket Number	SIR-MIS-00016-US-PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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I am the:

☐ Applicant/Inventor.

☒ Assignee (s) of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed.

SIGNATURE of Applicant or Assignee of Record

Signature		Date	<input type="text" value="7/16/2008"/>
Name	<input type="text" value="Peter Haeberli"/>	Telephone	<input type="text" value="415-814-8491"/>
Title and Company	<input type="text" value="Managing Assistant Counsel, Sirna Therapeutics, Inc. (wholly owned subsidiary of Merck & Co.)"/>		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature required, see below*.

☒ *Total of forms are submitted.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450